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PTO/SB/21 (02-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/757,011
	Filing Date	January 9, 2001
	First Named Inventor	Vassil Iliya Ognyanov
	Art Unit	1624
	Examiner Name	Coleman, Brenda Libby
Total Number of Pages in This Submission	Attorney Docket Number	317743-103C

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Arthur E. Jackson, Reg. # 34,354
Signature	
Date	February 17, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name		Jennifer A. Cliver	
Signature		Date	2/17/2005

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**REVOCATION OF POWER OF  
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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/757,011
Filing Date	01/09/2001
First Named Inventor	Vassil Iliya Ognyanov
Art Unit	1624
Examiner Name	Coleman, Brenda Libby
Attorney Docket Number	317743-103C

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

39731

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
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OR

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name Keyin J. Ontiveros

Signature [Handwritten Signature]

Date Oct 8, 2004

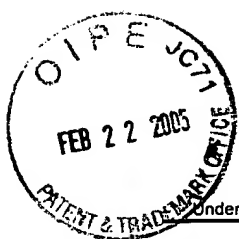
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Allelix Neuroscience Inc.Application No./Patent No.: 09/757,011 Filed/Issue Date: January 9, 2001Entitled: Pharmaceutical Treatment of Neurological and Neuropsychiatric DisordersAllelix Neuroscience Inc., a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.The extent (by percentage) of its ownership interest is \_\_\_\_\_ %  
in the patent application/patent identified above by virtue of either:A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:1. From: Inventors To: Allelix Neuroscience Inc.The document was recorded in the United States Patent and Trademark Office at  
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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

October 8, 2004

Date

801.583.4939

Telephone number

Kevin J. Ontiveros

Typed or printed name



Signature

Vice President and Assistant Secretary

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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